



PART B - FEE(S) TRANSMITTAL

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24999 7590 06/17/2003

MILLEN, WHITE, ZELANO & BRANIGAN, PC
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ARLINGTON, VA 22201

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/807,462	07/19/2001	Beth A. Burnside	550750	7386
TITLE OF INVENTION: ORAL PULSED DOSE DRUG DELIVERY SYSTEM			PHARMA-142P1	

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	09/17/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRAVERS, RUSSELL S	1617	424-494000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Millen, White, Zelano
2. Branigan, P.C.
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Shire Laboratories, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Rockville, Maryland, USA

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☐ Publication Fee

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(Authorized Signature)

(Date)

Anthony J. Zelano, 27,969

June 27, 2003

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JUN 27 2003

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